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NEUROLOGY: CAREERS PLUS

UP CLOSE AND PERSONAL WITH AUDRIUS V. PLIOPLYS, MD VISUAL ARTIST AND NEUROLOGIST

By Dawn Antoline

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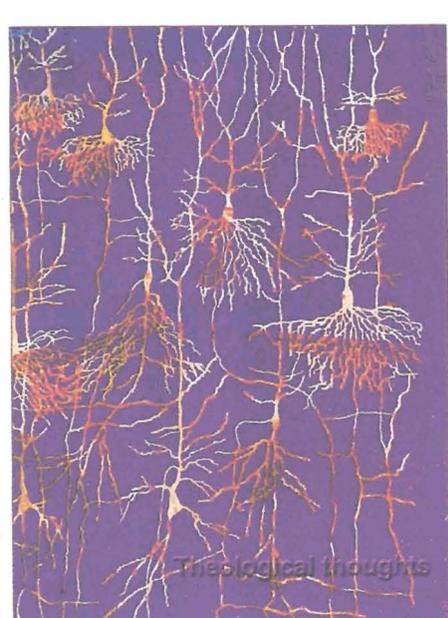
Not everyone would step away from a promising medical career to live the life of an artist, but Audrius V. Plioplys, MD, did just that. After completing medical school at the University of Chicago in 1975

and an internship in adult internal medicine at the University of Wisconsin Hospitals, he left medicine for three years to create and show his artwork full-time in Washington, DC.

Later, he returned to medicine and

started a residency in adult neurology at the Mayo Clinic. Although he is currently a child neurologist at Michael Reese and Mercy Hospitals and Chairman of the Pediatric Long Term Care Section of the American

Medical Director's Association, he continues to create art with neurological themes. One of his photographs was displayed at the 2002 Winter Olympics in Salt Lake City.



Theological thoughts

Theological Thoughts digitally incorporate photographs and the drawings of Cajal to represent thinking.



Thoughts of stone displacements: Ellesmere Is. To Victoria Is., a photograph of stones transported from their original location via airplane.

In an interview with *Neurology Today*, Dr. Plioplys discussed his uniquely neurological approach to art and his continued commitment to melding his neurological and artistic interests.

WHAT INSPIRED YOU TO BECOME A NEUROLOGIST?

I went to the University of Chicago for my undergraduate work in physics. My aim in life then was to become a nuclear physicist. For some reason, the physics curriculum had a requirement of two biology courses, which I protested vehemently, but I ended up taking a general biology course. The professor was very entertaining, and his classes were just fantastic. In the second quarter, he started talking about the central nervous system, and I absolutely was fascinated. I wondered about how the brain works and how nerve cells connect to one another to produce sensations, motor functions, and dreams. A few weeks after that, I changed my major to premed, planning on going to medical school for neurology.

WHAT INSPIRED YOU TO BECOME AN ARTIST?

When I was in elementary school, a close friend of mine started taking art classes, and he showed me the work he was doing, paintings and such. I first

became interested in art then, and that interest resurfaced when I was in medical school. I decided to pursue art in my spare time, so I got oil paints and

canvases and started painting. My passion for art got bigger and bigger, and by the time I had finished medical school, I wasn't even sure if I wanted to do my internship. I was thinking about doing art full time at that point, but I'd already been accepted to an internship and I needed to make some money, so I did a general medical internship at the University of Wisconsin. My plan was to save enough money during the internship to concentrate on art. It was a passion that had gotten so big that I just had no choice.

I would have been dishonest with myself if I had stayed in medicine at that time. I spent the next three years doing art before returning to medicine.

WHAT MADE YOU GO BACK TO MEDICINE?

Two things. First, the financial reality of being an artist is that you don't make any money. When I worked at Wisconsin, my annual income from my internship was about \$10,000. I lived like a church mouse, spending nothing, and was able to save enough money to do my art for three years. I sold some art, but not enough to make ends meet, since it is very difficult to sell artwork. Finally, I ran out of money.

Second, although I was enjoying myself immensely as an artist, I started feeling progressively guilty about not using this incredible background knowledge and experience at various medical schools – not to mention my internship. When I had finished my internship at the University of Wisconsin I had my choice of residency programs in neurology, psychiatry, and internal medicine – all of which I had declined to pursue my art. I had all this knowledge and ability, but I wasn't doing anything good with it. I eventually decided to go back into medicine and figure out a way to combine my interests in art, research, and clinical medicine. During my residency at the Mayo Clinic, I decided to concentrate more on artwork that dealt with thinking and the thought process.

PLEASE DESCRIBE WHAT YOU DO IN YOUR VARIOUS PROFESSIONAL POSITIONS.

My professional activities have changed over time. When I moved to Chicago after completing my training, I was the Director of Child Neurology at the Michael Reese Hospital. I also ran the Alzheimer Disease Center there and a Mercy Hospital. Later, I directed a research program there. I was doing basic laboratory research in brain growth and development, some of which touched on Alzheimer issues.

Today, the laboratory work has closed out and most of my clinical work involves taking care of children with severe cerebral palsy, who are in skilled nursing facilities and other long-term care settings because their medical conditions are too complex for their families to care for them. I also run child neurology clinics for Advocate Health Maintenance Program, a health care program. My current research is mostly clinical studies for children with cerebral palsy, to deal with practical things like survival rates, osteoporosis, seizures, and preventing pulmonary infections.

WORK WITH CHILDREN WITH NEUROLOGIC DISORDERS?

I had been working with elderly patients in their 80s or 90s who had had multiple strokes and other neurological problems, who were doing very badly medically. But I felt I could do so much more working with young children. Instead of dealing with a couple more years of life, I could make a positive impact on an entire lifetime. Even though most of what I do is difficult, and you don't see progress often, the occasional cases where I do make a tremendous impact – they are rare, but they do happen – make child neurology worthwhile for me. That's why I went into it, and I don't regret it.

WHAT IS THE GOAL OF YOUR ART AND WHAT MEDIUMS DO YOU USE?

My main goal is to continue exploring in a visual-metaphorical art form the structure and function of the central nervous system. I also try to investigate artistically how consciousness arises as thoughts and memories.

My work has changed over time. I have done mixed media work with lights, doors, windows, and mirrors in the past. For quite a few years, I did photography-based work. During my residency, I did many EEGs of myself thinking about different artistic topics.

PLEASE DESCRIBE YOUR MOST RECENT WORK.

I have recently been doing art on my computer. I start off with a photograph and use Adobe Photoshop to digitally overlay different images. My latest project is *Neurotheology*, which deals with how ideas, thoughts, and even theologic concerns are emergent properties of the actions of the central nervous system, particularly cerebrocortical neurons. For this particular work I used images that were drawn more than 100 years ago by Santiago Ramon y Cajal, a famous neuroanatomist and neuropathologist.

I did this around the millennium, 2000 years since the birth of Christ, so I

incorporated some Christian references and Cajal's drawings. I layered them to produce a metaphorical expression on how the nervous system functions and how these theological thoughts are

emergent ones from underlying memories, representations, photographs.

I will continue to do digitally processed photographically-based work, and will also continue to concentrate on combining aspects of nervous system functioning and the emergent properties that come out of it.

HOW DOES ART FACTOR INTO YOUR WORK AND SCHEDULE?

Art is not something I do to relax; it is work. The energy and concentration

that goes into it is very much the same as when I write a research grant or article or when I am seeing patients. I try to work time for art in around my medical responsibilities. Sometimes I have even taken off a week to work on the art full time. Sometimes I feel frustrated that I don't have time to do my artwork. Clinical, administrative, and research duties become overbearing, but I still find time for my art. For the past 15 years, I have been blending these things together, and I'm making progress bit by bit. *